

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <i>10668177</i>	FILING DATE
						CLAIMS	
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
1	1						51
2		1					52
3		1					53
4		1					54
5		1					55
6		5					56
7		5					57
8		1					58
9							59
10							60
11							61
12							62
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15							65
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39							89
40							90
41							91
42							92
43							93
44							94
45							95
46							96
47							97
48							98
49							99
50							100
TOTAL IND.							TOTAL IND.
TOTAL DEP.							TOTAL DEP.
TOTAL CLAIMS	16						TOTAL CLAIMS

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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